



I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.

BY: *Sheryl R. Neumann* Date: *October 24, 2003*

MAIL STOP MISSING PARTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of: :
Kimiya IKUSHIMA et al. :
Conf. No.: 7607 : Group Art Unit: 2812
Appln. No.: 10/601,470 : Examiner:
Filing Date: June 23, 2003 : Attorney Docket No.: 10407-53US
(A3040MT-US1)
Title: ELECTRONIC DEVICE AND METHOD FOR FABRICATING THE
ELECTRONIC DEVICE

TRANSMITTAL OF MISSING PARTS OF APPLICATION
FILING DATE GRANTED

In response to the Notice to File Missing Parts dated September 25, 2003, we submit herewith the following:

- ☒ [X] Copy of the Notice to File Missing Parts of Application -- Filing Date Granted, mailed September 25, 2003.
- ☐ [] No Notice to File Missing Parts has been received.
- ☒ [X] Declaration and Power of Attorney.
- ☐ [] Verified English translation of application as filed.
- ☐ [] Priority document(s): Certified copy(ies) of patent application No(s)., filed in on from which priority is claimed under 35 U.S.C. § 119.
- ☐ [] Formal drawings: sheets
- ☐ [] Information Disclosure Statement, PTO/SB/08A and/or PTO/SB/08B, and cited references.
- ☐ [] Preliminary Amendment.

- ☐ Nucleotide and/or Amino Acid Sequence Submission, including:
- ☐ Computer readable copy ☐ Paper Copy ☐ Verified Statement
- ☐ Petition for Extension of Time along with requisite fee.
- ☐ Request for Refund.
- ☒ Request for Corrected Filing Receipt. Attached is a marked-up copy of the Filing Receipt showing corrections.
- ☐ Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under 37 C.F.R. §1.27 as ☐ an Independent Inventor, or ☐ a Small Business Concern, or ☐ a Non-Profit Organization.
- ☐ Other:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE:			BASIC FEE:	
			\$385.			\$770	
Total	-20 =		X9	\$	OR	X18	\$
Independent	- 3=		X43	\$	OR	X86	\$
<input type="checkbox"/> Multiple Dependent Claims Present			\$145	\$	OR	\$290	\$
			TOTAL	\$	OR	TOTAL	\$

- ☒ The following fees noted below are being paid.
- ☒ Surcharge of \$130.00 for late filing of filing fee and/or Declaration and Power of Attorney.
- ☐ Surcharge of \$130 for late filing of English translation.
- ☐ Extension of Time fee in the amount of \$____.00 (Petition for Extension of Time is attached).
- ☐ Filing Fee in the amount of \$____.00 calculated above.
- ☒ Enclosed is our firm's check in the amount of \$130.00 for the above fee(s).
- ☒ The Commissioner is hereby authorized to charge and/or credit Deposit Account No. 50-1017 (Billing No. 210407.0053) as noted below. A duplicate copy of this sheet is enclosed.
- ☐ The above-calculated fee(s) calculated totaling \$____.00.
- ☒ Any overpayments or deficiencies in the above-calculated fee(s).
- ☒ Any additional fees required under 37 C.F.R. § 1.16 or § 1.17.

- ☒ In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

October 24, 2003

(Date)

By:

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